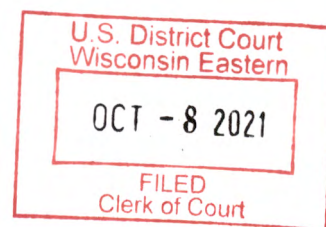


21CV1153
WES

AMENDED COMPLAINT

(for non-prisoner filers without lawyers)



**UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF WISCONSIN**

(Full name of plaintiff(s))

MICHAEL KALKHOFF

v.

Case Number:

(Full name of defendant(s))

PANERA BREAD CO. LLC

(to be supplied by Clerk of Court)

A. PARTIES

1. Plaintiff is a citizen of WISCONSIN and resides at
(State)

P.O. Box 13553 WAUWATOSA, WI 53213

(Address)

(If more than one plaintiff is filing, use another piece of paper.)

2. Defendant PANERA BREAD CO. LLC (Name)

is (if a person or private corporation) a citizen of _____
(State, if known)

and (if a person) resides at _____
(Address, if known)

and (if the defendant harmed you while doing the defendant's job)

worked for _____
(Employer's name and address, if known)

(If you need to list more defendants, use another piece of paper.)

B. STATEMENT OF CLAIM

On the space provided on the following pages, tell:

1. Who violated your rights;
2. What each defendant did;
3. When they did it;
4. Where it happened; and
5. Why they did it, if you know.

[illegible]

C. JURISDICTION

☒ I am suing for a violation of federal law under 28 U.S.C. § 1331.

OR

☐ I am suing under state law. The state citizenship of the plaintiff(s) is (are) different from the state citizenship of every defendant, and the amount of money at stake in this case (not counting interest and costs) is \$ _____.

D. RELIEF WANTED

Describe what you want the Court to do if you win your lawsuit. Examples may include an award of money or an order telling defendants to do something or to stop doing something.

I SUBMITTED TWO PACKETS FOR THE JUDGES

REVIEW. AFTER I SUBMITTED THE FIRST

ONE I REALIZED I WAS IN ERROR

AFTER IT WAS IN THE MAIL SYSTEM.

THE SECOND LETTER "CERTIFIED" MAIL IS

CORRECT! ON III STATEMENT OF CLAIM

(WHICH IS THE MOST IMPORTANT PART OF YOUR CLAIM)

AS IT STATES ON YOUR WEBSITE) A) "X" TERMINATION
OF EMPLOYMENT. "X" FAILURE TO PROMOTE ME. "X" UNEQUAL

TERMS & CONDITIONS. "X" RETALIATION. "X" OTHER ACTS;

HOSTILE WORK ENVIRONMENT, AGE. AMENDED (AK) 10/07/2021

E. JURY DEMAND

I want a jury to hear my case.

☐ - YES

☐ - NO

I declare under penalty of perjury that the foregoing is true and correct.

Complaint signed this TENTH day of
OCTOBER 2021.

Respectfully Submitted,

Michael Kalkhoff
Signature of Plaintiff

262. 282. 3452
Plaintiff's Telephone Number

N/A
Plaintiff's Email Address

MICHAEL KALKHOFF
P.O. Box 13553
WAUWATOSA, WI 53213
(Mailing Address of Plaintiff)

(If more than one plaintiff, use another piece of paper.)

III. Statement of Claim

Write a short and plain statement of the claim. Do not make legal arguments. State as briefly as possible the facts showing that each plaintiff is entitled to the damages or other relief sought. State how each defendant was involved and what each defendant did that caused the plaintiff harm or violated the plaintiff's rights, including the dates and places of that involvement or conduct. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

A. The discriminatory conduct of which I complain in this action includes (check all that apply):

☐

Failure to hire me.

☒

Termination of my employment.

☒

Failure to promote me.

☐

Failure to accommodate my disability.

☒

Unequal terms and conditions of my employment.

☒

Retaliation.

☒

Other acts (specify):

HOSTILE WORK ENVIRONMENT; AGE

(Note: Only those grounds raised in the charge filed with the Equal Employment Opportunity Commission can be considered by the federal district court under the federal employment discrimination statutes.)

AMENDED
Michael Kalhoff
10/07/2021

B. It is my best recollection that the alleged discriminatory acts occurred on date(s)

C. I believe that defendant(s) (check one):

☐

is/are still committing these acts against me.

☐

is/are not still committing these acts against me.

D. Defendant(s) discriminated against me based on my (check all that apply and explain):

☐

race

☐

color

☐

gender/sex

☐

religion

☐

national origin

☐

age (year of birth)

(only when asserting a claim of age discrimination.)

☐

disability or perceived disability (specify disability)

E. The facts of my case are as follows. Attach additional pages if needed.